

Page 1 of 2 Pages [X] Original [] Sub			
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	stitute [] Sup	plemental Atty.	Docket: MOESTRUP=2
Combined Declaration for Par	tent Applicati	ion and Power	r of Attorney
As a below-named inventor, I hereby declare that:			
My residence, post office address and citizenship are as and sole inventor (if only one name is listed below) or an subject matter which is claimed and for which a patent is s	original, first and jo	int inventor (if plura	I believe I am the original, first Il names are listed below) of the
THE FUNCTION OF A HAPTOGLOBIN-HAEMOGLO	BIN RECEPTORAN	D THE USES THEF	REOF
Despecification of which (check one)			
is attached hereto; [X] was filed in the United States under U.S. Appln. No. *; or	35 U.S.C. §111 on C	October 16, 2001, as	
was/will be filed in the U.S. under (PCT) application, PCT/	_; filed	, entry reque	ested on*;
national stage application rec		pln. No	*; §371/§102(e) date
and was amended on October 16, 2001 (if applicable).			
(include dates of amendments under P	CT Art. 19 and 34 if Po	CT)	
I have reviewed and understand the contents of the ab amendment referred to above; and I acknowledge the dul known by me to be material to patentability as defined in: I hereby claim foreign priority benefits under 35 U.S.C. § inventor's or plant breeder's rights certificate(s), or under other than the U.S., listed below:	y to disclose to the 37 C.F.R. §1.56.	Patent and Trademar	k Office (PTO) all information oreign application(s) for patent,
Application No.	Country	Filing Date (MM/DI	D/YYYY)
PA 2000 01543	Denmark	October 16, 20	000
PA 2001 00039 E	Denmark	January 11, 20	001
If 1 claimed foreign priority above, I hereby identify belt application designating a country other than the United S date <u>before</u> that of the earliest application from which fore Non-Priority Application No.	States) or for an inv	entor's or plant breed	der's certificate, having a filing there are none):
,			,
I hereby claim the benefit under 35 U.S.C. §119(e) of any Application No. 60/270,120	Filing Da	sional applications lis ste (MM/DD/YYYY) sruary 22, 2001	tted below:
I hereby claim the benefit under 35 U.S.C. §120 of any PCT international application(s) designating the U.S., list application is not disclosed in such U.S. or PCT internat U.S.C. §112, I acknowledge the duty to disclose to the I C.F.R. §1.56 which became available between the filing d date of this application:	ed below and, insoft tional application in PTO all information	ar as the subject matt the manner provide which is material to	ter of each of the claims of this d by the first paragraph of 35 patentability as defined in 37
Application No. Filing Date (I	MM/DD/YYYY)	Status (natentes	d, pending, abandoned)

As a named inventor, I hereby appoint the following registered practitioners to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

All of the practitioners associated with Customer Number 001444

Direct all correspondence to the address associated with Customer Number 001444, which is presently:

BROWDY AND NEIMARK, P.L.L.C. 624 Ninth Street, N.W. Washington, D.C. 20001-5303 (202) 628-5197

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Page 2 of 2 Pages	展	Ø		Atty. Dock	ei
Title: THE FUNCTION	OF A HAPTOGODIN-HAE	MOGLOBIN RE	CEPTORAND THE	USES THEREOF	
U.S. Application filed	October 16, 2001	, Serial No.			
PCT Application filed		, Serial No.			

The undersigned hereby authorizes the U.S. Attorneys or Agents appointed herein to accept and follow instructions from HOIDERG as to any action to be taken in the U.S. Patent and Tradeant Office regarding this application without direct communication between the U.S. Attorneys or Agents and the undersigned. In the event of a change of the persons from whom instructions may be taken, the U.S. Attorneys or Agents appointed herein will be so notified by the undersigned.

I hereby further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. §1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF FIRST INVENTOR	INVENTOR'S SIGNATURE	1	DATE
Søren MOESTRUP	Exen Mus	25	Dec 12,200
RESIDENCE		CITIZENSHIP	
Aarhus N, Denmark		Danish	Ì
POST OFFICE ADDRESS			
Jørgen Brønlundsvej 14, DK-8200 Aarhus N, Den			
FULL NAME OF SECOND JOINT INVENTOR	INVENTOR'S SIGNATURE		DET 1 200
Holger J. MØLLER	1///	(VEC 1/200
RESIDENCE	12	CITIZENSHIP	
Aabyhøj, Denmark	<u> </u>	Danish	
POST OFFICE ADDRESS			
Kærvej 9A, DK-8230, Aabyhøj, Denmark			
FULL NAME OF THIRD JOINT INVENTOR	INVENTOR'S SIGNATURE		DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			1
FULL NAME OF FOURTH JOINT INVENTOR	INVENTOR'S SIGNATURE		DATE
RESIDENCE		CITIZENSHIP	1
POST OFFICE ADDRESS			
FULL NAME OF FIFTH JOINT INVENTOR	INVENTOR'S SIGNATURE		DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			
FULL NAME OF SIXTH JOINT INVENTOR	INVENTOR'S SIGNATURE		DATE
			}
RESIDENCE		CITIZENSHIP	
		1	
POST OFFICE ADDRESS			

ALL INVENTORS MUST REVIEW APPLICATION AND DECLARATION BEFORE SIGNING. ALL ALTERATIONS MUST BE INITIALED AND DATED BY ALL INVENTORS PRIOR TO EXECUTION. NO ALTERATIONS CAN BE MADE AFTER THE OECLARATION IS SIGNED. ALL PAGES OF DECLARATION MUST BE SEEN BY ALL INVENTORS.

Atty Docket: MOESTRUP=1A

	IN THE	UNITED	STATES	PATENT	AND TRADEMARK	OFFICE	
In re Application of:)	Applicatio	n Division	ı
Soren MOESTRUP		A 200	_)	ATTN: BOX	MISSING PA	RI
Serial No.: 09/977,577 Filing Date: October 16 For: THE FUNCTION OF A	6	166	<i>.</i>)	Washington		
Filing Date: October 16	, 20√01⊌		-GE/)	Confirmati	on No. 199	1
For: THE FUNCTION OF A	HAPFOGL	OBIN-HA	EMOG LOB	IN)	January 28	, 2002	

LATE SMANISSION OF FILING FEE AND/OR DECLARATION

HON. COMMISSIONER OF PATENT Washington, D.C. 20231

The present communication is in response to the "NOTICE TO FILE MISSING PARTS OF APPLICATION..." dated November 28, 2001.

[XX] Attached hereto is an executed oath or declaration in compliance with 37 C.F.R. 1.63, identifying the present application by title, filing date, and priority information.

Attached hereto is an executed oath or declaration in compliance with 37 C.F.R. 1.63, identifying the present application by title, serial number, filling date and priority information, and to which is attached a duplicate copy of the application as filed. Applicant claims small entity status. See 37 CFR 1.27.

[xx] A Preliminary Amendment to reduce multiply dependent claims.

A Communication.

ixxi Preliminary Amendment and Statements in Support of Filing and Submissions in Accordance with 37 C.F.R. '1.821-1.825.

Sequence Listing (hardcopy), and computer-readable form of Sequence Listing.

A certified copy of priority document no.______, filed _____, is also attached. Priority is claimed.

An Information Disclosure Statement with 08A-1449 and references is also attached.

The following fee is calculated below: (Col. 1) (Col. 2) SMALL ENTITY OTHER THAN SMALL ENTITY EOP. NO FILED NO EXTRA RATE FEE OR RATE FEE BASIC FEE \$ 370,00 \$ 740.00 OR TOTAL CLAIMS 38 - 20 X 9= 1.8 \$ X 18= INDEP, CLAIMS 5 X 42= S X 84 = 8. 3 \$ 420.00 INI MULTIPLE DEPENDENT CLAIMS PRESENTED + 135 == S + 270 = \$ 270.00 If the difference in Co1, 1 is less than 0, enter "0" in Col, 2 TOTAL TOTAL \$ 1.430.00

Surcharge for late filing of English translation \$ 130.00

[xx] Late filing of Declaration surcharge in the amount of:

Small Entity [] \$65.00 Other than Small Entity [XX] \$130.00

It is hereby petitioned for an extension of time in accordance with 37 C.F.R. 1.136(a). The appropriate fee required by 37 C.F.R. 1.17 is calculated as shown below:

> Response Filed Within] First - \$ 55.00 \$ 200.00 Second -- \$ 460.00 Third] Fourth - \$ 720.00 Month After Time Period Set

Response Filed Within | First - \$ 110.00 Second - \$ 440.00 - \$ 920.00 Third - \$1,440.00 Fourth Month After Time Period Set

Other Than Small Entity

fxx1 Conditional Petition for Extension of Time:

Small Entity

If any extension of time for a response is required, applicant requests that this be considered a petition therefor.

in the amount of \$ Check No. is enclosed to cover the above fees.

Credit Card Payment Form, PTO-2038, authorizing payment in the amount of \$1,560.00 is [XX] enclosed to cover the fees.

[XX] The Commissioner is hereby authorized and requested to charge any additional fees which may be required in connection with this application or credit any overpayment to Deposit Account No. 02-4035. This authorization and request is not limited to payment of all fees associated with this communication, including any Extension of Time fee, not covered by check or specific authorization, but is also intended to include all fees for the presentation of extra claims under 37 CFR 1.16 and all patent processing fees under 37 CFR 1.17 throughout the prosecution of the case. This blanket authorization does not include patent issue fees under 37 CFR 1.18.

BROWDY AND NEIMARK, P.L.L.C. Attorneys for Applicant(s)

Cooper Aver P.

Registration No. 28,005